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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/628,346	05/21/2004	Giovina DiMateco-Leggio		4478

7590 02/19/2008
GIOVINA INTERNATIONAL INC. OF AMERICA
SUITE #807
19495 BISCAYNE BLVD.
AVENTURA, FL 33180

EXAMINER

JEAN-LOUIS, SAMIRA JM

ART UNIT	PAPER NUMBER
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1617

MAIL DATE	DELIVERY MODE
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02/19/2008

PAPER

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

Interview Summary	Application No. 10/628,346	Applicant(s) DIMATEEO-LEGGIO, GIOVINA	
	Examiner SAMIRA JEAN-LOUIS	Art Unit 1617	

All participants (applicant, applicant's representative, PTO personnel):

(1) SAMIRA JEAN-LOUIS. (3)_____.

(2) Giovina Di Matteo Leggio. (4)_____.

Date of Interview: 12 February 2008.

Type: a) ☒ Telephonic b) ☐ Video Conference
c) ☐ Personal [copy given to: 1) ☐ applicant 2) ☐ applicant's representative]

Exhibit shown or demonstration conducted: d) ☐ Yes e) ☐ No.

If Yes, brief description: _____.

Claim(s) discussed: _____.

Identification of prior art discussed: _____.

Agreement with respect to the claims f) ☐ was reached. g) ☒ was not reached. h) ☐ N/A.

Substance of Interview including description of the general nature of what was agreed to if an agreement was reached, or any other comments: Examiner attempted to call Pro se applicant Giovina Di Matteo Leggio but both telephone and fax numbers have been disconnected...

(A fuller description, if necessary, and a copy of the amendments which the examiner agreed would render the claims allowable, if available, must be attached. Also, where no copy of the amendments that would render the claims allowable is available, a summary thereof must be attached.)

THE FORMAL WRITTEN REPLY TO THE LAST OFFICE ACTION MUST INCLUDE THE SUBSTANCE OF THE INTERVIEW. (See MPEP Section 713.04). If a reply to the last Office action has already been filed, APPLICANT IS GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER OF ONE MONTH OR THIRTY DAYS FROM THIS INTERVIEW DATE, OR THE MAILING DATE OF THIS INTERVIEW SUMMARY FORM, WHICHEVER IS LATER, TO FILE A STATEMENT OF THE SUBSTANCE OF THE INTERVIEW. See Summary of Record of Interview requirements on reverse side or on attached sheet.

Examiner Note: You must sign this form unless it is an Attachment to a signed Office action. _____
Examiner's signature, if required